

Algorithm D: Pharmacological management of asthma in children aged 5 to 11 years

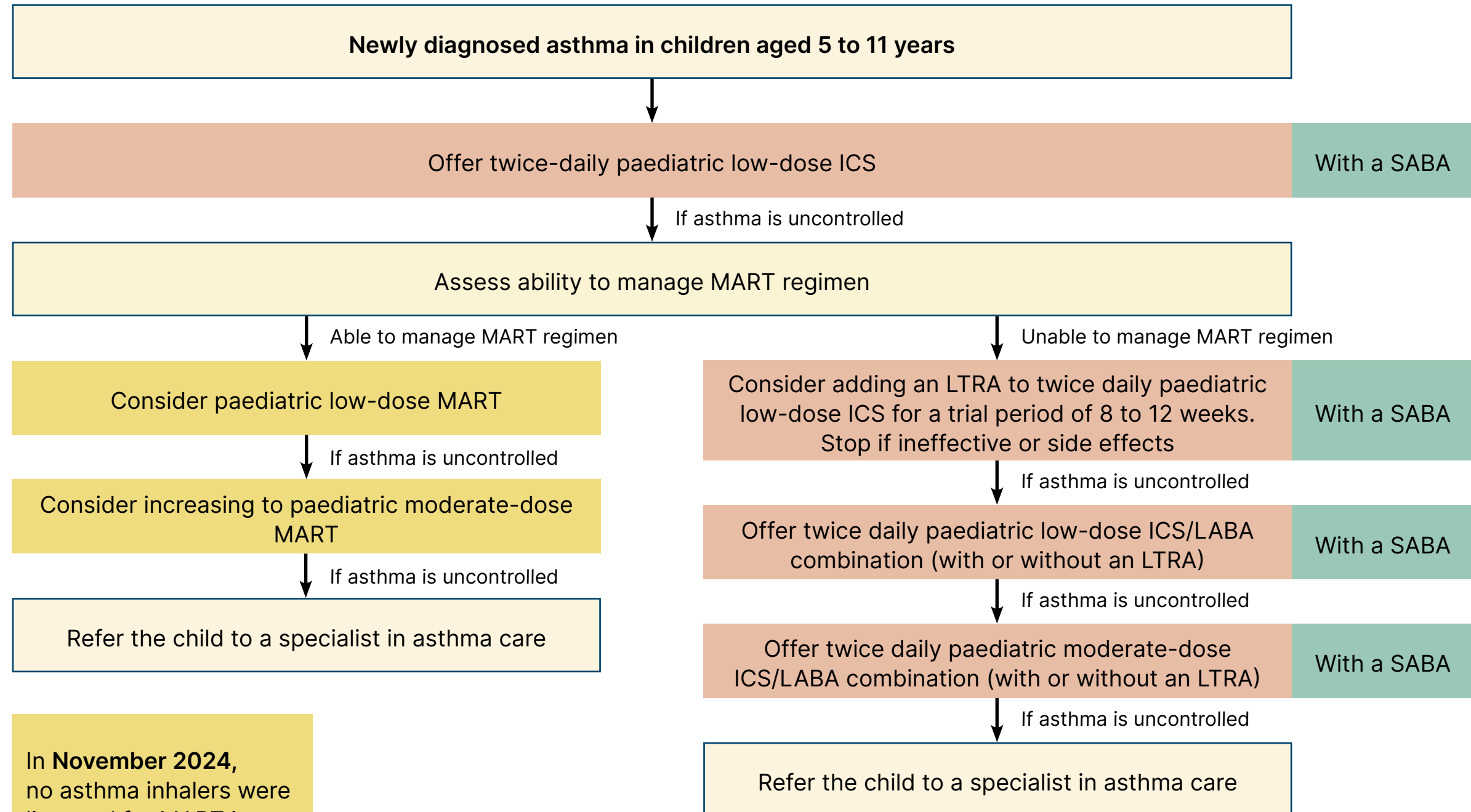
BTS, NICE and SIGN guideline on asthma

Take into account and try to address the possible reasons for uncontrolled asthma before starting or adjusting medicines for asthma.
For example: alternative diagnoses or comorbidities; suboptimal adherence; suboptimal inhaler technique; active or passive smoking (including e-cigarettes); psychosocial factors; seasonal factors; environmental factors (such as air pollution and indoor mould exposure)

Symptom relief

MART

Maintenance therapy



For guidance on dosages for paediatric low-dose ICS, see [inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline](#)

In **November 2024**, no asthma inhalers were licensed for MART in children under 12, so use would be off-label

i Uncontrolled asthma: Any exacerbation requiring oral corticosteroids or frequent regular symptoms (such as using reliever inhaler 3 or more days a week or night-time waking 1 or more times a week)

ICS, inhaled corticosteroid; LABA, long-acting beta₂ agonist; LTRA, leukotriene receptor antagonist; MART, maintenance and reliever therapy (using ICS/formoterol combination inhalers); SABA, short-acting beta₂ agonist.